

EXHIBIT C

Artists Business Management Group, INC
5950 Canoga Ave #417
Woodland Hills, CA 91367

MACKENZIE THOMA

[REDACTED] [REDACTED]

HOLLYWOOD, CA 90028

|||||||

Artists Business Management Group, INC
5950 Canoga Ave #417
Woodland Hills, CA 91367
818-719-6541

July 18, 2022

CONFIDENTIAL

MACKENZIE THOMA

[REDACTED]
HOLLYWOOD, CA 90028

Dear KENZIE:

We have prepared the following returns from information provided by you without verification or audit:

U.S. Individual Income Tax Return (Form 1040)
California Resident Income Tax Return (Form 540)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements.

Federal Filing Instructions

[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]

Your return is being filed electronically with the IRS and is not required to be mailed. If you mail a paper copy of Form 1040 to the IRS it will delay processing of your return.

Form 8879 IRS e-file Signature Authorization authorizes your electronically filed return to be signed with a Personal Identification Number (PIN) and certifies that Part I amounts are from your tax return. Review and sign the Form 8879 IRS e-file Signature Authorization and mail it as soon as possible to:

Artists Business Management Group, INC
5973 Avenida Encinas, Suite 200
Carlsbad, CA 92008

Important: Your returns will not be filed with the taxing agencies until the signed e-file Signature Authorization forms and payment for services is received by this office.

Retain a copy of the signed and dated Form 8879 for your records.

Your required 2022 federal estimated tax payments are as follows:

SCHEDULE C
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss from Business
(Sole Proprietorship)

OMB No. 1545-0074
2021
Attachment Sequence No. **09**

Go to www.irs.gov/ScheduleC for instructions and the latest information.

Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships generally must file Form 1065.

Name of proprietor
MACKENZIE THOMA

Social security number (SSN)
[REDACTED]

A Principal business or profession, including product or service (see instructions)
MODEL

B Enter code from instructions
711510

C Business name. If no separate business name, leave blank.
MACKENZIE THOMA MODEL

D Employer ID number (EIN) (see instr.)

E Business address (including suite or room no.)
City, town or post office, state, and ZIP code
HOLLYWOOD CA 90028

F Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) **▶**

G Did you "materially participate" in the operation of this business during 2021? If "No," see instructions for limit on losses ☒ Yes ☐ No

H If you started or acquired this business during 2021, check here ☐ Yes ☒ No

I Did you make any payments in 2021 that would require you to file Form(s) 1099? See instructions ☐ Yes ☒ No

J If "Yes," did you or will you file required Form(s) 1099? ☐ Yes ☒ No

Part I Income

1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked ☐

2 Returns and allowances

3 Subtract line 2 from line 1

4 Cost of goods sold (from line 42)

5 Gross profit. Subtract line 4 from line 3

6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)

7 Gross income. Add lines 5 and 6

1

2

3

4

5

6

7

Part II Expenses. Enter expenses for business use of your home only on line 30.

8 Advertising

9 Car and truck expenses (see instructions)

10 Commissions and fees

11 Contract labor (see instructions)

12 Depletion

13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions)

14 Employee benefit programs (other than on line 19)

15 Insurance (other than health)

16 Interest (see instructions):
a Mortgage (paid to banks, etc.)
b Other

17 Legal and professional services

18 Office expense (see instructions)

19 Pension and profit-sharing plans

20 Rent or lease (see instructions):
a Vehicles, machinery, and equipment
b Other business property

21 Repairs and maintenance

22 Supplies (not included in Part III)

23 Taxes and licenses

24 Travel and meals:
a Travel
b Deductible meals (see instructions)

25 Utilities

26 Wages (less employment credits)

27a Other expenses (from line 48)
b Reserved for future use

28 Total expenses before expenses for business use of home. Add lines 8 through 27a

29 Tentative profit or (loss). Subtract line 28 from line 7

30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions.
Simplified method filers only: enter the total square footage of: (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30

31 Net profit or (loss). Subtract line 30 from line 29.
• If a profit, enter on both **Schedule 1 (Form 1040), line 3** and on **Schedule SE, line 2**. (If you checked the box on line 1, see instructions). Estates and trusts, enter on **Form 1041, line 3**.
• If a loss, you must go to line 32.

32 If you have a loss, check the box that describes your investment in this activity. See instructions.
• If you checked 32a, enter the loss on both **Schedule 1 (Form 1040), line 3** and on **Schedule SE, line 2**. (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on **Form 1041, line 3**.
• If you checked 32b, you must attach **Form 6198**. Your loss may be limited.

8

9

10

11

12

13

14

15

16a

16b

17

18

19

20a

20b

21

22

23

24a

24b

25

26

27a

27b

28

29

30

31

32a

32b

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule C (Form 1040) 2021

ID #:2952

SCHEDULE SE
(Form 1040)**Self-Employment Tax**

OMB No. 1545-0074

2021Attachment
Sequence No. **17**Department of the Treasury
Internal Revenue Service (99)► Go to www.irs.gov/ScheduleSE for instructions and the latest information.

► Attach to Form 1040, 1040-SR, or 1040-NR.

Name of person with self-employment income (as shown on Form 1040, 1040-SR, or 1040-NR)

Social security number of person
with self-employment income ►**MACKENZIE THOMA****Part I Self-Employment Tax****Note:** If your only income subject to self-employment tax is **church employee income**, see instructions for how to report your income and the definition of church employee income.

- A**
- If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361, but you had \$400 or more of
- other**
- net earnings from self-employment, check here and continue with Part I
- ☐

Skip lines 1a and 1b if you use the farm optional method in Part II. See instructions.

- 1a**
- Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A

1a

- b**
- If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code AH

1b ()

Skip line 2 if you use the nonfarm optional method in Part II. See instructions.

- 2**
- Net profit or (loss) from Schedule C, line 31; and Schedule K-1 (Form 1065), box 14, code A (other than farming). See instructions for other income to report or if you are a minister or member of a religious order

2

- 3**
- Combine lines 1a, 1b, and 2

3

- 4a**
- If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from line 3

4a**Note:** If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.

- b**
- If you elect one or both of the optional methods, enter the total of lines 15 and 17 here

4b

- c**
- Combine lines 4a and 4b. If less than \$400,
- stop**
- ; you don't owe self-employment tax.
- Exception:**
- If less than \$400 and you had
- church employee income**
- , enter -0- and continue

4c

- 5a**
- Enter your
- church employee income**
- from Form W-2. See instructions for definition of church employee income

5a

- b**
- Multiply line 5a by 92.35% (0.9235). If less than \$100, enter -0-

5b

- 6**
- Add lines 4c and 5b

6

- 7**
- Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2021

7

- 8a**
- Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$142,800 or more, skip lines 8b through 10, and go to line 11

8a

- b**
- Unreported tips subject to social security tax from Form 4137, line 10

8b

- c**
- Wages subject to social security tax from Form 8919, line 10

8c

- d**
- Add lines 8a, 8b, and 8c

8d

- 9**
- Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11

9

- 10**
- Multiply the
- smaller**
- of line 6 or line 9 by 12.4% (0.124)

10

- 11**
- Multiply line 6 by 2.9% (0.029)

11

- 12**
- Self-employment tax.**
- Add lines 10 and 11. Enter here and on
- Schedule 2 (Form 1040), line 4**

12

- 13**
- Deduction for one-half of self-employment tax.**

Multiply line 12 by 50% (0.50). Enter the result here and on **Schedule 1 (Form 1040), line 15****13****Part II Optional Methods To Figure Net Earnings (see instructions)****Farm Optional Method.** You may use this method **only** if (a) your gross farm income¹ wasn't more than \$8,820, or (b) your net farm profits² were less than \$6,367.

- 14**
- Maximum income for optional methods

14

- 15**
- Enter the
- smaller**
- of: two-thirds (
- ²
- /
- ₃
-) of gross farm income
- ¹
- (not less than zero) or \$5,880. Also include this amount on line 4b above

15**Nonfarm Optional Method.** You may use this method **only** if (a) your net nonfarm profits³ were less than \$6,367 and also less than 72.189% of your gross nonfarm income,⁴ and (b) you had net earnings from self-employment of at least \$400 in 2 of the prior 3 years. **Caution:** You may use this method no more than five times.

- 16**
- Subtract line 15 from line 14

16

- 17**
- Enter the
- smaller**
- of: two-thirds (
- ²
- /
- ₃
-) of gross nonfarm income
- ⁴
- (not less than zero) or the amount on line 16. Also, include this amount on line 4b above

17¹ From Sch. F, line 9; and Sch. K-1 (Form 1065), box 14, code B.² From Sch. F, line 34; and Sch. K-1 (Form 1065), box 14, code A — minus the amount you would have entered on line 1b had you not used the optional method.³ From Sch. C, line 31; and Sch. K-1 (Form 1065), box 14, code A.⁴ From Sch. C, line 7; and Sch. K-1 (Form 1065), box 14, code C.

Schedule C	Qualified Business Income Calculation Worksheet	2021
Name MACKENZIE THOMA		Taxpayer Identification Number [REDACTED]
Principle business or profession MODEL		Form/Schedule C Unit 1

1. Schedule C, Line 31, Net profit or (loss)	1.	[REDACTED]
Additions for qualified business income:		
2. Form 4797, Ordinary income	2.	
Prior suspended losses utilized this year		
3. Passive suspended losses	3.	
4. At-Risk suspended losses	4.	
5. Section 179 carryover	5.	
6. Total additions to net profit or (loss). Add lines 2 through 5.	6.	
Subtractions for qualified business income		
7. Form 4797, Ordinary loss (includes share of Net section 1231 losses)	7.	
8. Deductible portion of self-employment taxes	8.	[REDACTED]
9. Self-employed SEP, SIMPLE, and qualified plans	9.	
10. Self-employed health insurance deduction	10.	
11. Reserved	11.	
12. Reserved	12.	
13. Total subtraction to net profit or (loss). Add lines 7 through 12.	13.	[REDACTED]
14. Qualified business income for this activity. Line 1 plus line 6 less line 13.	14.	[REDACTED]

	Beginning of Year			End of Year		
	Pre -2018	After 2017	Allowed loss	Pre -2018	After 2017	QBI Portion of
Carryovers:	(A)	(B)	(C)	(D)	(E)	Allowed Losses
Passive activity:						
Operating						
Form 4797, Part II						
Section 1231 loss						
At-Risk:						
Operating						
Form 4797, Part II						
Section 1231 loss						
Section 179						
Section 179 - COGS						
Other:						
Section 179						
Section 179 - COGS						

Amount to Form 8995, line 3 or Schedule C (Form 8995-A), line 2 qualified business loss carryforward

Form 1040	Net Earnings from Self-Employment Worksheet	2021
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Name MACKENZIE THOMA	Taxpayer Identification Number <div></div>
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	Taxpayer	Spouse
Farm profit or (loss)		
Schedule F		
Farm Partnerships - Schedule K-1, box 14, code A		
Auto expense from farm partnerships	()	()
Amortization from farm partnerships	()	()
Depreciation & Section 179 from farm partnerships	()	()
Depletion from farm partnerships	()	()
Other expenses from farm partnerships	()	()
Home office expenses from farm partnerships	()	()
Unreimbursed partnership expenses from farm partnerships	()	()
Debt financed acquisition interest from farm partnerships	()	()
Farm adjustment to SE Income		
Net farm profit or (loss) - Schedule SE line 1a	<u>0</u>	<u>0</u>
Conservation Reserve Program payments to social security/disability benefit recipients included on Sch F, In 4b or listed on Sch K-1 (Form 1065), box 20, code AH- Sch SE line 1b	<u>() 0</u>	<u>() 0</u>
Nonfarm profit or (loss)		
Schedule C (excluding minister Schedule C income reported below)	<div></div>	
Nonfarm partnerships - Schedule K-1, box 14, code A		
Auto expense from nonfarm partnerships	()	()
Amortization from nonfarm partnerships	()	()
Depreciation & section 179 from nonfarm partnerships	()	()
Depletion from nonfarm partnerships	()	()
Other expenses from nonfarm partnerships	()	()
Home office expenses from nonfarm partnerships	()	()
Unreimbursed partnership expenses from nonfarm partnerships	()	()
Debt financed acquisition interest from nonfarm partnerships	()	()
Nonfarm adjustment to SE income		
Self-employment income reported as other income		
Self-employment income from contracts and straddles		
Minister/clergy self-employment income (from Clergy Worksheet Page 3, line 7)		
Net nonfarm profit or (loss) - Schedule SE line 2	<u><div></div></u>	<u>0</u>
Other income items subject to and/or exempt from self-employment tax		
Fees received for services performed as a notary public	()	()
Earnings while debtor in a chapter 11 bankruptcy case		
Taxable community property income/-loss		
Exempt community property income/-loss	()	()
Net adjustment included on Schedule SE, line 3	<u>0</u>	<u>0</u>
Net profit (loss) from self-employment activities - Schedule SE line 3	<u><div></div></u>	<u>0</u>
Church employee income - Schedule SE, Page 1 line 5a		

Form	1040	Salaries & Wages Report		2021
Name			Taxpayer Identification Number	
MACKENZIE THOMA			[REDACTED]	
T/S	Employer	Federal Wages	Federal Withheld	Soc Sec Wages
A	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
B				
C				
D				
E				
F				
G				
H				
I				
J				
K				
L				
M				
Taxpayer Spouse Totals		[REDACTED]	[REDACTED]	[REDACTED]

	Soc Sec Withheld	Medicare Wages	Medicare Withheld	Soc Sec Tips	Allocated Tips	Dep Care Ben	Other, Box 14
A							
B							
C							
D							
E							
F							
G							
H							
I							
J							
K							
L							
M							
Taxpayer							
Spouse							
Totals							

	State	State Wages	State Withheld	Name of Locality	Local Wages	Local Withheld
A						
B						
C						
D						
E						
F						
G						
H						
I						
J						
K						
L						
M						
Taxpayer						
Spouse						
Totals						